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PTO/SB/18 (08-00)

Approved for use through 10/31/2002. OMB 0651-0032

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted With Initial Filing <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	717816.21
	First Named Inventor	REUBI, Jean-Claude
	COMPLETE IF KNOWN	
	Application Number	Not yet known
	Filing Date	Herewith
	Group Art Unit	Not yet known
	Examiner Name	Not yet known

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

USE OF LABELLED CCK-B RECEPTOR LIGANDS FOR THE DETECTION AND LOCALIZATION OF MALIGNANT HUMAN TUMOURS

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YY)

as United States Application Number or PCT International (if applicable).

Application Number

and was amended on (MM/DD/YY)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not claimed	Certified Copy Attached?	
96200498.2	EP	02/27/1996	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
PCT/US97/03056	WO	02/25/1997	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number or Bar Code Label				27128		OR <input type="checkbox"/> Correspondence address below	
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<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>							
NAME OF SOLE OR FIRST INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any]) Jean-Claude				Family Name Or Surname Reubi			
Inventor's Signature						Date	
Residence City: Wabern			State		Country Switzerland		Citizenship Switzerland
Mailing Address Austrasse 4							
Mailing Address							
City Wabern		State		ZIP CH-3084		Country Switzerland	
NAME OF SECOND INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name Or Surname			
Inventor's Signature						Date	
Residence City:			State		Country		Citizenship
Mailing Address							
Mailing Address							
City		State		ZIP Wabern		Country	
<input type="checkbox"/> Additional inventors are being named on the __ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.							